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SUPPLEMENTAL DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.67)

Attorney Docket Number	149459.00003
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First Named Inventor	Claus Harder
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COMPLETE IF KNOWN

Application Number	10/597,099
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Filing Date	July 11, 2006
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Art Unit	1615
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Examiner Name	TBA
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I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPLANT FOR RELEASING AN ACTIVE SUBSTANCE INTO A VESSEL THROUGH WHICH A BODY MEDIUM FLOWS

(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 02/04/2005

as United States Application Number or PCT International

Application Number PCT/EP2005/001167 and was amended on ((MM/DD/YYYY) 07/11/2006 (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
10 2004 006 745.7	DE	02/06/2004	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 2004 029 611.1	DE	06/09/2004	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance completing the form, call 1-800-PTO-9199 and select option 2.

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SUPPLEMENTAL DECLARATION – Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		The address associated with Customer Number: 25207		OR <input type="checkbox"/> Correspondence address below	
Name Jason A. Bernstein POWELL GOLDSTEIN LLP					
Address ONE ATLANTIC CENTER, 14TH FLOOR 1201 W. PEACHTREE STREET, NW					
City ATLANTA		State GEORGIA		ZIP 30309	
Country UNITED STATES		Telephone 404-572-6900		Email <u>patents@pogolaw.com</u>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Claus			Family Name or Surname Harder		
Inventor's Signature					Date
Residence: City Uttenreuth		State		Country Germany	Citizenship German
Mailing Address Memelstrasse 7					
City Uttenreuth		State		Zip 91080	Country Germany
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Roland			Family Name or Surname Rohde		
Inventor's Signature					Date
Residence: City Burgdorf		State		Country Germany	Citizenship German
Mailing Address Flaatmoor 4					
City Burgdorf		State		Zip 31303	Country Germany
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being required on the <u>3</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

SUPPLEMENTAL DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Bernd		Heublein (Deceased)	
Inventor's Signature		Date	
Residence: City Hannover	State	Country Germany	Citizenship German
Mailing Address Albrechtstrasse 2			
City Hannover	State	Zip D-30627	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Erhard		Flach	
Inventor's Signature		Date	
Residence: City Berlin	State	Country Germany	Citizenship German
Mailing Address Krusauer Strasse 20a			
City Berlin	State	Zip 12305	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Wolfgang		Geistert	
Inventor's Signature		Date	
Residence: City Rheinfelden	State	Country Germany	Citizenship German
Mailing Address Rheinstrasse 7			
City Rheinfelden	State	Zip 79618	Country Germany

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Page 2 of 2

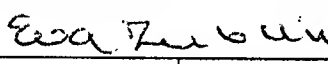
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Gernot		Kolberg	
Inventor's Signature		Date	
Residence: City Berlin	State	Country Germany	Citizenship German
Mailing Address Karl-Marx-Strasse 37			
City Berlin	State	Zip 12043	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Heinz		Müller	
Inventor's Signature		Date	
Residence: City Erlangen	State	Country Germany	Citizenship German
Mailing Address Stubenichstrasse 14 d			
City Erlangen	State	Zip D-91052	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

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SUPPLEMENTAL DECLARATION Supplemental Sheet For Legal Representatives (35 U.S.C. 117) On Behalf of A Deceased or Incapacitated Inventor

Enter Deceased or incapacitated inventor's Name BERND HEUBLEIN Page 1 of 1

Name of Legal Representative:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Eva		Heublein	
Legal Representative's Signature		Date	
		1st of July 2007	
Residence: City	Coburg	State	Country Germany
Citizenship German			
Mailing Address Wassergasse 4			
Mailing Address			
City	Hannover	State	Zip 96450
Country Germany			
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Nora		Heublein	
Legal Representative's Signature		Date	
Residence: City		Köln	
State		Country Germany	
Citizenship German			
Mailing Address Ostlandstrasse 50			
Mailing Address			
City	Köln	State	Zip 50858
Country Germany			
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Christoph		Heublein	
Legal Representative's Signature		Date	
Residence: City		Hannover	
State		Country Germany	
Citizenship German			
Mailing Address Albrechtstrasse 2			
Mailing Address			
City	Hannover	State	Zip 30627
Country Germany			

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Art Unit	1615
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(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

02/04/2005

as United States Application Number or PCT International

Application Number PCT/EP2005/001167

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07/11/2006

(if applicable).

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			YES	NO	YES	NO
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10 2004 029 611.1	DE	06/09/2004	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Direct all correspondence to: <input checked="" type="checkbox"/>		The address associated with Customer Number: 25207		OR <input type="checkbox"/>	Correspondence address below
Name Jason A. Bernstein POWELL GOLDSTEIN LLP					
Address ONE ATLANTIC CENTER, 14 TH FLOOR 1201 W. PEACHTREE STREET, NW					
City ATLANTA		State GEORGIA		ZIP 30309	
Country UNITED STATES		Telephone 404-572-6900		Email patents@pogolaw.com	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Claus				Family Name or Surname Harder	
Inventor's Signature					Date
Residence: City Uttenreuth		State	Country Germany	Citizenship German	
Mailing Address Memelstrasse 7					
City Uttenreuth		State	Zip 91080	Country Germany	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Roland				Family Name or Surname Rohde	
Inventor's Signature					Date
Residence: City Burgdorf		State	Country Germany	Citizenship German	
Mailing Address Flaatmoor 4					
City Burgdorf		State	Zip 31303	Country Germany	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being required on the <u>3</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

SUPPLEMENTAL DECLARATION**ADDITIONAL INVENTOR(S)**

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Page 1 of 2

Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Bernd		Heublein (Deceased)	
Inventor's Signature		Date	
Residence: City Hannover	State	Country Germany	Citizenship German
Mailing Address Albrechtstrasse 2			
City Hannover	State	Zip D-30627	Country Germany
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Erhard		Flach	
Inventor's Signature		Date	
Residence: City Berlin	State	Country Germany	Citizenship German
Mailing Address Krusauer Strasse 20a			
City Berlin	State	Zip 12305	Country Germany
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Wolfgang		Geistert	
Inventor's Signature		Date	
Residence: City Rheinfelden	State	Country Germany	Citizenship German
Mailing Address Rheinstrasse 7			
City Rheinfelden	State	Zip 79618	Country Germany

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Supplemental Sheet

Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Gernot		Kolberg	
Inventor's Signature		Date	
Residence: City Berlin	State	Country Germany	Citizenship German
Mailing Address Karl-Marx-Strasse 37			
City Berlin	State	Zip 12043	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Heinz		Müller	
Inventor's Signature		Date	
Residence: City Erlangen	State	Country Germany	Citizenship German
Mailing Address Stubenichstrasse 14 d			
City Erlangen	State	Zip D-91052	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

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Enter Deceased or Incapacitated Inventor's Name BERND HEUBLEIN Page 1 of 1

Name of Legal Representative:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Eva		Heublein	
Legal Representative's Signature			Date
Residence: City Coburg	State	Country Germany	Citizenship German
Mailing Address Wassergasse 4			
Mailing Address			
City Hannover	State	Zip 96450	Country Germany
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Nora		Heublein	
Legal Representative's Signature <i>Nora Heublein</i>			Date <i>25th June 2007</i>
Residence: City Köln	State	Country Germany	Citizenship German
Mailing Address Ostlandstrasse 50			
Mailing Address			
City Köln	State	Zip 50858	Country Germany
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Christoph		Heublein	
Legal Representative's Signature			Date
Residence: City Hannover	State	Country Germany	Citizenship German
Mailing Address Albrechtstrasse 2			
Mailing Address			
City Hannover	State	Zip 30627	Country Germany

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First Named Inventor	Claus Harder
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Application Number	10/597,099
Filing Date	July 11, 2006
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Examiner Name	TBA

I hereby declare that:

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(Title of the invention)

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Application Number PCT/EP2005/001167 and was amended on ((MM/DD/YYYY)) 07/11/2006 (if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
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☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

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SUPPLEMENTAL DECLARATION – Utility or Design Patent Application

Direct all correspondence to:	<input checked="" type="checkbox"/>	The address associated with Customer Number:	25207	OR	<input type="checkbox"/>	Correspondence address below
Name Jason A. Bernstein POWELL GOLDSTEIN LLP						
Address ONE ATLANTIC CENTER, 14 TH FLOOR 1201 W. PEACHTREE STREET, NW						
City ATLANTA		State GEORGIA		ZIP 30309		
Country UNITED STATES		Telephone 404-572-6900		Email patents@pogolaw.com		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Claus			Family Name or Surname Harder			
Inventor's Signature					Date	
Residence: City Uttenreuth		State		Country Germany		Citizenship German
Mailing Address Memelstrasse 7						
City Uttenreuth		State		Zip 91080		Country Germany
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Roland			Family Name or Surname Rohde			
Inventor's Signature					Date	
Residence: City Burgdorf		State		Country Germany		Citizenship German
Mailing Address Flaatmoor 4						
City Burgdorf		State		Zip 31303		Country Germany
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being required on the <u>3</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.						

SUPPLEMENTAL DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Bernd		Heublein (Deceased)	
Inventor's Signature		Date	
Residence: City Hannover	State	Country Germany	Citizenship German
Mailing Address Albrechtstrasse 2			
City Hannover	State	Zip D-30627	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Erhard		Flach	
Inventor's Signature		Date	
Residence: City Berlin	State	Country Germany	Citizenship German
Mailing Address Krsauer Strasse 20a			
City Berlin	State	Zip 12305	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Wolfgang		Geistert	
Inventor's Signature		Date	
Residence: City Rheinfelden	State	Country Germany	Citizenship German
Mailing Address Rheinstrasse 7			
City Rheinfelden	State	Zip 79618	Country Germany

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SUPPLEMENTAL DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 2 of 2

Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Gernot		Kolberg	
Inventor's Signature		Date	
Residence: City Berlin	State	Country Germany	Citizenship German
Mailing Address Karl-Marx-Strasse 37			
City Berlin	State	Zip 12043	Country Germany
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Heinz		Müller	
Inventor's Signature		Date	
Residence: City Erlangen	State	Country Germany	Citizenship German
Mailing Address Stubenichstrasse 14 d			
City Erlangen	State	Zip D-91052	Country Germany
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

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SUPPLEMENTAL DECLARATION Supplemental Sheet

For Legal Representatives (35 U.S.C. 117) On Behalf of A Deceased or Incapacitated Inventor

Enter Deceased or Incapacitated Inventor's Name BERND HEUBLEIN Page 1 of 1

Name of Legal Representative:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Eva		Heublein	
Legal Representative's Signature			Date
Residence: City Coburg	State	Country Germany	Citizenship German
Mailing Address Wassergasse 4			
Mailing Address			
City Hannover	State	Zip 96450	Country Germany
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Nora		Heublein	
Legal Representative's Signature			Date
Residence: City Köln	State	Country Germany	Citizenship German
Mailing Address Ostlandstrasse 50			
Mailing Address			
City Köln	State	Zip 50858	Country Germany
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Christoph		Heublein	
Legal Representative's Signature <u>Christoph Heublein</u>			Date <u>30th June 2007</u>
Residence: City Hannover	State	Country Germany	Citizenship German
Mailing Address Albrechtstrasse 2			
Mailing Address			
City Hannover	State	Zip 30627	Country Germany

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